

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000089167

FILED
Apr 20, 2005
Secretary of State

Entity Name: CERTIFIED TRUST FINANCE, INC.

Current Principal Place of Business:

807 S. ORLANDO AVE
B
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 947869
MAITLAND, FL 32794 69

New Mailing Address:

FEI Number: 59-3603732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RASMUSSEN, DAVID
807 B S. ORLANDO AVE.
B
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RASMUSSEN, DAVID
Address: POBOX 947869
City-St-Zip: MAITLAND, FL 32794

Title: D () Delete
Name: O'BRIEN, SHAUGHN F
Address: 1253 STONE HAVEN CT.
City-St-Zip: HEATHROW, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID RASMUSSEN

D

04/20/2005

Electronic Signature of Signing Officer or Director

Date